COMMERCIAL BUILDING PERMIT APPLICATION

www.mtpleasantwi.gov buildinginspection@mtpleasantwi.gov

VILLAGE OF MOUNT PLEASANT

8811 CAMPUS DR, MT PLEASANT, WI 53406 Ph 262-664-7824 Ph 262-664-7825

Date Issued:

Job Address:						Permit #	
Job Owner:						Phone:	
Address:						ZIP Code	
Project:	New Bldg	·	_Addition		Alteration		Other
Building Project Area:sq'							
State Approved Plans Required: Yes No State Plan Approval Date:							
Notes:							
Architect:							
General Co	ntractor:						
Address:							
Email:							
Phone:			Fire Protect				
Plumber:			_HVAC:			_Electrician:	
THE BUILDING	G INSPECTO	R WILL CALC	ULATE FEES				
Fees:	Permit		_Review		Occupancy	<u>/</u>	Erosion
	Other						
Total Permit Fee		\$		_			
Total Project Cost		\$		(Includes L	abor and N	flaterials.)	
				that I agree to egulating the			ces of the Village of gs.
Owner or Agent					Date		
Zoning Approved:						Date	
Village Eng	gineer:					Date	
Building In	spector:					Date	